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ARIZONA STATE BOARD OF HEALTH 131	
District of ANDUAL BUREAU OF VITAL STATISTICS State Index No.	
Town of Alste ORIGINAL CERTIFICATE OF BIRTH County Registrar No.	
or Holle No.	
Full game of child hatha Cearl Tatters is supplemental report, as directed.	6
3. Ser of Child To be answered ONLY 1. Twin, triplet or other	ds.
8. PATHER Pull name Or May Clark	
9. Residence (Usual place of abode) Rose well,  If nonresident, give place and state arizonal.	
if nonresident, give place and state	•
10. Color or race  White 17. Age at last birthday 31 (Years) White 17. Age at last birthday 2.7 (Years)	
18. Birthplace (city or place)	
12. Birthplace (city or place)  (State or country) England (State or country)	
13. Occupation	
Nature of Industry Rance Wife Charles Operator Nature of industry Rance Wife Nature of Industry	
3). Number of children of this mather (1) (a) Born alive and now living (21). Were precautions taken against (5) the limit of this mather (6). Born alive but now dead.  (Taken as of time of birth of child hereth (b) Born alive but now dead.  (Caken as of time of birth of child hereth (c) Stillborn.	
CETTIFICATE OF ATTENDING DUVEICIAN OF MIDWIFE!	
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.  I hereby certify that I attended the birth of this child, who was a liborn alive or stillborn.	
When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other	;
Cerldences of life after birth.  Note and the supplemental report  Month, day, year.  Note after birth.  Address  Filed b f f 10.34 5 E 10.5 f 10	!
FRED 18. County Registrar.	
115-522-432	

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